



Biceps Tenodesis Protocol Dr. Murphy

Time Frame	Treatment	Goals
Post-Op Day	 Dressing change Instruction in signs and symptoms of infection Removal of pain pump Instruction in cryotherapy Instruction in pendulum exercise, fist pumps, elbow AAROM and shoulder PROM into flexion using opposite upper extremity 	 Independent in HEP of AAROM shoulder flexion, fist pumps, elbow AAROM, pendulum exercise, scapular retraction, shoulder shrugs and cryotherapy
Phase I 0-6 weeks	 Patient is to continue with independent HEP from PROM shoulder flexion and pendulum exercises. Patient is to wear sling for 6 weeks Dr. Murphy will order therapy again after his 6-week post - op check. 	 Progression of HEP as tolerated No in-clinic therapy
Phase II 6-12 weeks	 Frequency= 3x/week until ROM and strength are approaching WNL. Discharge sling at 6 weeks PROM all direct ions, progress as tolerated AAROM all directions as tolerated Instruction in shoulder PRE's at 6 weeks Resisted elbow flexion exercises at 10 weeks Begin in-clinic strengthening as tolerated at 8 weeks for shoulder/elbow and scapular stabilizers. Progress as tolerated 	ROM WNL @ 12 weeks Independent in PRE's by 10 weeks for progression independently Strength progressed as tolerated in clinic
Phase III 12-16 weeks	Frequency= 2x/week Continue to progress ROM and strength until WNL/WFL in all directions	 ROM WNL/WFL- discharge when goal met Independent in HEP for shoulder strengthening/ scapular stabilization, elbow flexion
Phase IV 4-6 months	• Frequency = prn	 Progress all ROM and strength to WFL if still not present